

**VIA FACSIMILE: 703/872-9306**

Atty. Docket No. PLA13 P-300

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Art Unit : 2834  
Applicant : Steve Anderson Platt  
Appl. No. : 09/981,231  
Filing Date : October 17, 2001  
Confirmation No.: 5580  
For : WIND POWERED GENERATOR

Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia 22313-1450

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**AUG 04 2004**

**OFFICIAL**

Dear Sir:

**CERTIFICATION OF FACSIMILE TRANSMISSION**

I hereby certify that the following papers are being transmitted by facsimile to the Patent and Trademark Office on the date shown below:

1. Claims as Amended/Request for Extension of Time (in duplicate, 4 pages)
2. Response (46 pages)

**YOU SHOULD RECEIVE A TOTAL OF 51 PAGES.**

August 4, 2004  
Date

Melanie S. Jernberg  
Melanie S. Jernberg  
Price, Heneveld, Cooper,  
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Post Office Box 2567  
Grand Rapids, Michigan 49501  
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Dear Sir:

Enclosed is a response to the Office Action dated March 4, 2004. The items checked below are appropriate:

X Applicants hereby petition for a two month extension of time to respond to the above Office Action. The fee of \$210.00 for the Extension is enclosed.

Any fee for additional claims has been calculated as shown below:

CLAIMS AS AMENDED

	Col. 1		Col. 2	Col. 3	Small Entity		Other Than A Small Entity	
	Claims Remaining After Amendment		Highest No. Previously Paid For	Present Extra	Rate	Add'l Fee	Rate	Add'l Fee
Total Claims	*73	Minus	**70	=3	x \$9	\$27	X \$ 18	\$
Independent Claims	*14	Minus	***11	=3	x \$43	\$129	X \$ 86	\$
First Presentation of Multiple Dependent Claims \$145						\$0	X \$290	\$
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT						\$156		\$

- \* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3
- \*\* If the "Highest No. Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
- \*\*\* If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

Applicant : Steve Anderson Platt  
Appln. No. : 09/981,231  
Page : 2

The "Highest No. Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

X Small entity status of this application under 37 C.F.R. §§ 1.9 and 1.27 has been established by a verified statement previously submitted or is enclosed.

     No additional fee is required.

X A fee of \$156.00 to cover the cost of the additional claims added by this response is due.

X A fee of \$210.00 to cover Petition for Extension of Time is due.

X A total fee in the amount of \$366.00 is due.

X Please charge any fees or credit overpayment to Deposit Account 16 2463. A duplicate copy of this sheet is attached.

PRICE, HENEVELD, COOPER,  
DEWITT & LITTON, LLP

Date

8/4/04

Marcus P. Dolce

Registration No. 46 073

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MPD/msj

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Page : 2

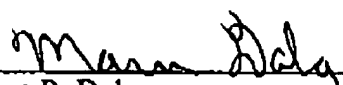
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PRICE, HENEVELD, COOPER,  
DEWITT & LITTON, LLP

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814104

  
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Dear Sir:

RESPONSE

In response to the Office Action mailed March 4, 2004, Applicant responds as follows.

Amendments to the claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks begin on page 27 of this paper.